TRAINING OFFICER MANUAL



UTAH DEPARTMENT OF HEALTH DIVISION OF FAMILY HEALTH AND PREPAREDNESS BUREAU OF EMERGENCY MEDICAL SERVICES

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INTRODUCTION

This manual has been developed for training officers of licensed, designated, and renewal testing and training agencies in the state of Utah. The purpose of this manual is to provide training officers with information and guidelines, which will enable them to maintain agency CME records, submit renewal materials and administer renewal agency skills evaluations. The training officer is responsible for becoming familiar with the material in this manual and to ensure that the most current information is obtained from the Utah Department of Health Bureau of EMS and Preparedness (BEMSP). Your agency's policies and procedures should be reviewed regularly to ensure that current standards are being met.

Changes in policy and procedures relating to training officers will occur periodically. These changes will be presented at the training officer seminars and posted on our web site. Questions should be directed to (BEMSP) training staff.

GENERAL INFORMATION

Authorized Agency

Only documented designated or alternate training officers from currently licensed, designated, or renewal testing and training programs are eligible to perform the functions of the agency training officer. If your agency does not respond to public 9-1-1 calls, your agency is most likely not licensed or designated. If this is the case your agency may need to complete an application for Teaching and Testing program's authorization. This can be found at http://bemsp.utah.gov/

Letter of Designation

All EMS agencies must designate a training officer. An agency may have one designated training officer and one alternate training officer. To designate a training officer an agency must send a letter of designation to BEMSP identifying their training officer. The letter of designation must have the following:

- Training officer's printed full name, EMS number, and signature
- The alternate training officer's full name and EMS number (where applicable)
- The agency administrator's printed full name and signature
- Be written on agency letterhead (where applicable)

A new letter of designation must be provided to BEMSP with any change in the designated training officer. It is the responsibility of each agency and the training officer to notify BEMSP of any changes in training officer status.

Training Officer Contract

Every training officer must sign an official BEMSP Training Officer Contract. New training officers must complete the training officer certification requirements. Current training officers must follow all the training officer renewal requirements.

Certification Requirement

The training officer is responsible for maintaining documentation for all EMS personnel who have completed a CPR course within the prior two years that is consistent with the most current version of the American Heart Association Guidelines for Healthcare Provider CPR and ECC. Any EMS personnel who do not stay current with the CPR requirement will be considered non-compliant. For AEMT, and EMT-IA PALS or equivalents as approved by BEMSP and paramedic agencies, this also includes ACLS.

CME Training

The training officer is responsible for developing and directing all Continuing Medical Education (CME) training within their organization.

- 1. The training officer is responsible for providing a training program for the agency in which:
 - a. All renewal requirements are met within the four-year period.
 - b. The CME requirements as described in rule are met (Recertification Protocol for the CME requirements listed by certification level).
 - c. CME hour requirements are met within the four-year renewal period.
- 2. The training officer must ensure compliance to BEMSP policies during all CME training sessions.
- 3. The training officer must ensure that those who are conducting CME training are knowledgeable and qualified in the subjects they teach. The individuals who teach CME training sessions should be certified EMS instructors. An individual who has unique knowledge in the subject being taught and is qualified, may teach that topic even if he or she is not certified as an EMS instructor. The CME program should be organized around the training and responsibilities of the EMS personnel.
- 4. The training officer is responsible for ensuring the intent of CME is fulfilled. The intent of CME is to:
 - a. Develop the EMS personnel's understanding of clinical and operational roles and responsibilities.
 - b. Develop skills in patient assessment and in all treatment procedures within the scope of the EMS personnel.
 - c. Develop skill in the use and maintenance of all equipment required to render emergency medical care at the level of certification.
 - d. Provide opportunities for discussion, skill practice, and critique of skill performance.
 - e. Develop and maintain EMS personnel skills that are not used on a regular basis.
 - f. Develop, with the aid of the medical director, training and evaluation of skills and knowledge for agency variances and waivers allowing administration of treatments beyond standard scope of practice.
- 5. Each CME credit hour is based upon one hour of participation.
- 6. Independent self-study (such as reading a textbook) should only be approved if the training officer administers an evaluation such as a written test that approximately matches the content,

breadth, and depth of the self-study. To receive credit for the time the EMS personnel must demonstrate through this evaluation a sound understanding of the content. As a training officer you should only offer self-study if the evaluation tool has already been developed for the topic. It should only be used as a supplemental method of obtaining CME.

EMS personnel may complete CME hours through different methodologies, but approximately 30% of the CME hours must be "live," practical, hands-on training. All CME must be approved by the training officer, BEMSP, or the Continuing Education Coordination Board for Emergency Medical Services (CECBEMS). All CME must be related to the required skills and knowledge of the EMS personnel, as outlined in the applicable scope of practice.

CME Records

The training officer is responsible for maintaining and/or verifying records of all CME obtained by each certified person of the agency. This responsibility includes:

- 1. Maintaining CME records that provide verification of the following:
 - a. Dates of training;
 - b. Activity, CME topic, name, and certification number (if applicable) of instructor(s);
 - c. Documentation of students in attendance; and
 - d. Accurate documentation of actual time students spent in class.
- 2. Maintaining records of CME received outside of the agency:
 - a. The training officer may sign for outside training sessions if documentation of the individual's attendance is on file.
 - b. The training officer is responsible for verifying authenticity of any training documents from outside their agency.
- 3. Providing semi-annual CME reports to the individual EMS personnel on his/her current recertification status.
- 4. Maintaining records of required certifications (such as healthcare provider CPR, PALS, and ACLS) and ensuring all personnel remain current. The individual providing this training must be a certified instructor. The agency must also designate criteria for instruction such as following the AHA instructional standards. If the agency develops its own certification program, it must first receive BEMSP approval that the course meets the current guidelines.
- 5. Maintaining records for seven years after the renewal period.
- 6. Keep all CME records at the agency in a location easily available for audit by BEMSP.

The recertification manual lists all of the required CME content by topic and level.

AGENCY-AFFILIATED RENEWAL

It is the training officer's responsibility to ensure that renewal materials are completed and submitted to BEMSP.

The training officer must make sure that the following information is completed for each recertifying EMS personnel and *on file* at the agency in a safe and secure location:

- 1. Renewal Practical Skills Evaluation
- 2. Required certification course completion within the past two years
- 3. Copy of all CME information (See: Recertification Protocol for exact CME requirements listed by certification level)

The following must be submitted to BEMSP in one complete package:

- 1. A completed, signed, and notarized application for each EMS personnel recertifying.
- 2. An ID photo for each EMS personnel. This may be included on a disk or sent via e-mail to BEMSP.
- 3. A letter signed by the training officer verifying that each EMS personnel who is recertifying has completed all the renewal requirements and that copies of applicable paperwork is on file with the agency.
- 4. Advanced EMT, EMT-IA, or paramedic: A letter signed by the certified off-line medical director, recommending the individual for renewal and verifying the individual's demonstrated proficiency in all of the following skills:
 - (i) Initiating and terminating intravenous infusion
 - (ii) Completion of pediatric vascular access skills station
 - (iii) Insertion and removal of intraosseous needle
 - (iv) Insertion and removal of an advanced airway device
 - (v) Administration of medications via intramuscular, subcutaneous, and intravenous routes
 - (vi) EKG rhythm recognition
- 5. Fees must be submitted with renewal application materials. Fees may be paid by cash, check, money order, agency purchase order, or credit card. BEMSP will invoice only if we receive an agency purchase order. BEMSP must receive all fees and documents before renewal is completed.
- 6. Submit a statement confirming the negative results of a TB examination or, where applicable, positive TB test information. (See: R426-5-700 for further detail.)

AGENCY TEST PROCEDURES

If an individual's license lapses they are required to take a written exam. All written tests (if required) must be taken through the National Registry of Emergency Medical Technicians (NREMT) at a Pearson Vue site. This exam is the **NREMT assessment exam** (not for certification) Written test scheduling is done through Pearson Vue. Tests must be scheduled at least 15 days prior to the desired test date. For additional information, contact NREMT at 614-888-4484

Practical skills evaluation is an ongoing process. Skills may be evaluated on runs or simulated situations.

The renewal skills evaluation and continuing medical education hours are designed to confirm an individual has maintained the minimal knowledge and skills required of EMS personnel. The knowledge and skill requirements are the same as those outlined in the National EMS Education Standards.

Any agency/organization that wishes to administer the skills evaluations for their own EMS personnel or other renewing EMTs must meet the following criteria to be approved by BEMSP:

- 1. Be a licensed, designated, or authorized renewal testing and training agency.
- 2. Have and maintain a roster of certified EMS personnel and make the roster available to the BEMSP upon request.
- 3. Have a functioning CME program.
- 4. Have a designated training officer who will assume total responsibility for the EMS personnel renewal practical testing within an agency.
- 5. The designated training officer must be state certified as a training officer before assuming the responsibilities of a training officer.
- 6. The practical skills evaluations must be administered in accordance with BEMSP standards to attest to the individual's competency in demonstrating all skills.
- 7. Utilize only state-certified EMS instructors to evaluate practical skills.
- 8. Conduct all evaluations in a fair and unbiased manner.
- 9. Maintain records on all EMS personnel's practical skills evaluations in accordance with BEMSP standards for seven years past the certification period.
- 10. Allow BEMSP staff to access, without notice, any and all test sites and/or practical test and training records.
- 11. The training officer may not validate his/her own renewal. Another BEMSP-recognized training officer must validate it.

EMS PERSONNEL RENEWAL REQUIREMENTS

All renewal_requirements are clearly outlined in the Recertification Protocol Manual which can be found at http://health.utah.gov/ems/certification/recertification_protocol.pdf

AGENCY MEDICAL DIRECTOR CREDENTIALING

In order for an individual to provide emergency medical services for an agency the individual must be licensed by the state of Utah and credentialed by the agency's medical director. An important distinction is that an EMS provider may be credentialed to perform some functions for one agency but not for another.

- 1. An agency's medical director may, through variance or state-approved optional drugs or procedures, credential EMS individuals to provide those skills and/or administer those drugs that are beyond the scope of their license. Example: A medical director obtains a variance from the state to allow the agency AEMTs to perform a procedure that is not part of the National EMS Education Standards. After appropriate training and evaluation the AEMTs may be credentialed by the medical director to perform that procedure while working for that agency.
- 2. If an agency wishes to use EMS personnel who are licensed to a higher level than the agency's

license allows, the medical director may credential them to the level of the agency's license. Example: A paramedic may work for an AEMT licensed agency but is therefore only credentialed by the medical director to function as an AEMT and may only wear an AEMT patch while working for that agency.

3. An agency's medical director has the option of credentialing an individual to a lower level of care than their license, if the medical director feels the individual does not meet their standards of care or the expectations of the agency, yet he or she would like to retain the individual's service. Example: A paramedic licensed agency's medical director has determined that a paramedic in the organization does not meet the expectations of a paramedic in their agency. The medical director can credential the paramedic to function at a lower level of license while serving in that agency. In this example the paramedic would wear the patch of the credentialed lower level, such as EMT while on shift with the agency. This may not necessarily limit the paramedic's license if he/she is working for another agency and credentialed by that agency's medical director.

EMS INSTRUCTOR RECERTIFICATION REQUIREMENTS

The requirements for EMS instructor recertification include:

- A. Maintain Utah EMS provider certification.
- B. Submit verification of attendance at a BEMSP-sponsored instructor seminar at least once every two years.
- C. Submit verification of 30 hours of teaching experience within a certification period.
- D. Submit an application and pay all applicable fees.

All verification materials must be submitted with recertification documents.

TRAINING OFFICER CERTIFICATION REQUIREMENTS

- A. A training officer must maintain EMS instructor certification to retain training officer certification.
- B. Successfully complete BEMSP course for new training officers.
- C. Submit an application and pay all applicable fees.
- D. Every two years, submit a completed and signed "Training Officer Contract" to BEMSP agreeing to abide by the standards and procedures in the most current Training Officer Manual.

TRAINING OFFICER RECERTIFICATION REQUIREMENTS

- A. Attend a training officer seminar every two years.
- B. Maintain current Utah EMS instructor and Utah EMT-B, EMT-I, EMT-IA, paramedic, or EMD certification.
- C. Submit an application and pay all applicable fees.
- D. Every two years, submit a completed and signed new "Training Officer Contract" to the

department agreeing to abide by the standards and procedures in the most current training officer manual

ADJUSTING EMT RENEWAL DATES TO COINCIDE WITH THEIR AGENCY

BEMSP cannot extend certifications beyond four (4) years unless the individual is a member of the National Guard or reserve component of the armed forces and is on active duty when the certification expires. If this happens, the individual shall recertify in accordance with Utah Code 39-2-64. However, BEMSP will allow for adjustments for individual certifications to facilitate the certification process of an agency. Therefore, BEMSP will adjust the individual's EMS certification when they meet the following criteria:

- 1. The EMS personnel moved to a new geographical location or changed to a different provider service, within their certification period. Changes will not be made for individuals who have multiple provider agencies when their certification date is applicable to one of those agencies.
- 2. The EMS personnel and/or the provider agency must request the adjustment, in writing, prior to the EMS personnel's assigned renewal date.
- 3. The EMS personnel's total certification period cannot exceed four years. CME hours will be adjusted accordingly. No extensions will be given.
- 4. All renewal changes must be completed before the EMS personnel's expiration date.